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Case Docket No.

PKZ-021CP

## THE ASSISTANT COMMISSIONER FOR PATENTS Box Patent Application Washington, D.C. 20231

JC825 U.S. PTO	COTOO! /SO	01/23/01

"Express Mail" I	Mailing Label Number EL589 752 237 US
Date of Deposit	January 23, 2001
37 CFR 1.10 on the dat	transmittal letter and the papers referred to as being enclosed therein are being ed States Postal Service "Express Mail Post Office to Addressee" service under endicated above and is addressed to the Assistant Commissioner for Patents, Washington, DC 20231.
	Viriato G. Cardoso
Please Print Nam	e of Person Signing

	L	Please P	rint Name of Person	Sigr	ning					
Sir:										
Transmi	tted herewi	ith for filing is th	e patent applicatio	n of	,					
Inventor	(s):	Stuart B. Levy a	and Mark L. Nelson	n						
For:	Tetracycl	ine Compounds	For Treatment of C	Cryp	otosporidium l	Parvum Relate	ed Disord	ers		
Enclosed	l are:									
	This is a serial no.	request for filing	a	n [	☐ divisional a entitled	pplication un	der 37 CF	FR 1.53(b), o	f pending pri	or application
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		ment of the inver							A record	ation forms
	cover shee	et (Form PTO 15	95) is also enclose	d.					A record	ation form
	Applicant	claims small ent	ity status. See 37	CFR	R 1.27.					
	Other									
The filing		en calculated as								
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FOR:		(Col. 1)	(Col. 2)	1	SMALL		_	SMALL	ENTITY	_
BASIC F		NO. FILED	NO. EXTRA		RATE	FEE	<u>OR</u>	RATE	FEE	]
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	(Col. 1)	(Col. 2)
FOR:	NO. FILED	NO. EXTRA
BASIC FEE	///////////////////////////////////////	///////////////////////////////////////
TOTAL CLAIMS	77 - 20	= 57
INDEP. CLAIMS	4 - 3	= 1
☐ MULTIPLE DEPENDENT CLAIMS PRESENTED		

<sup>\*</sup> If the difference in Col. 2 is less than zero, enter "0" in Col. 2.

RATE	FEE	<u>OR</u>
/////////	\$	<u>OR</u>
x 9=	\$	<u>OR</u>
x 40	\$	<u>OR</u>
+135	\$	<u>OR</u>
TOTAL	0	<u>OR</u>

RATE	FEE	
////////	\$ 710	
x 18=	\$ 1026	
x 80	\$ 80	
+270	\$	
TOTAL	\$1816.00	

## THE FILING FEES ARE NOT BEING PAID AT THIS TIME.

U ;,	A duplicate copy of this sheet is enclosed.
	A check in the amount of \$ to cover the filing fee is enclosed.
	The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No  A duplicate copy of this sheet is enclosed.

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(	The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No  A duplicate copy of this sheet is enclosed.  Any patent application processing fees under 37 C.F.R. 1.17.  The issue fee set in 37 C.F.R. 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 C.F.R 1.311(b).
_	Any filing fees under 37 C.F.R. 1.16 for presentation of extra claims.
	A check in the amount of \$ to cover the recording of assignment documents is also enclosed.
	Address all future communications (May only be completed by applicant, or attorney or agent of record) to Elizabeth A. Hanley, Esq. at Customer Number: 000959 whose address is:
	Lahive & Cockfield, LLP 28 State Street Boston, Massachusetts 02109
	LAHIVE & COCKFIELD, LLP Attorneys at Law  By
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